Heart and Lung Institute did not apply and therefore, the said hospital could not be considered for recognition under CGHS Delhi.

(d) The CGHS had during March-April, 2004, invited tenders or fresh recognition of private hospitals/diagnostic centres under CGHS Delhi against which this hospital has also applied among others. The eligible applicant hospitals/diagnostic centres satisfying the criteria laid down in the tenders would be entitled for consideration on merit for recognition under CGHS.

\s the process of recognition under CGHS is a time consuming one which involves inspection of the applicant hospitals and thereafter obtaining necessary administrative and financial approval, etc., no specific timeframe can be laid down at present for coming out with the fresh list of private hospitalsxecognised under CGHS Delhi.

Embezzlement of funds at AIIMS

1710. SHRIAMAR SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact thata few senior doctors of All India Institute of Medical Sciences are involved in the embezzlement of funds and the CBI is making investigation;

(b) if so; what are the details thereof; and

(c) whether it is also a fact that CBI had asked permission from the AIIMS to file chargesheet against the officers concerned and if so, the details thereof and whether the AIIMS has not given the required permission and if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Yes, Sir. A surprise check in the H LA Department/laboratory of All India Institute of Medical Sciences, New Delhi was conducted by the Central Bureau of Investigation, Anti Corruption Branch, New Delhi on 3.1.2002 and a regular case has been registered by the CBI. The CBI has requested the institute for grant of sanction for prosecution in respect of Dr. N.K. Mehra, Head of the Deptt. of Transplant Immunology and Immunogenetics, AIIMS for the misconduct and misappropriating the various clinical test fees collected

from the patients. The appropriate authority to grant sanction for prosecution is the Governing Body of the institute. The proposal for grant of sanction for prosecution will be placed before the next meeting of the Governing Body for consideration.

Regional Cancer Centres

1711. SHRI CHO S. RAMASWAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the policy guideline of the Government to set up Regional Cancer Centres in the country;

(b) whether private hospitals and hospitals run by charitable trusts will be considered for the RCC;

(c) the financial assistance which is presently being given to these RCCs;

(d) the number of such cases for setting up RCCs pending with the Government for approval;

(e) when these applications will be cleared; and

(f) how many cancer patients are presently being treated every year in the existing regional cancer centres across the country every year?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI. PANABAKA LAKSHMI): (a) and (b) As per the present policy new RCCs are to be recognised in the States where they are not recognized and additional RCCs in populous States. For this purpose only the Government Medical College Hospitals or Government Hospitals providing radiotherapy treatment and fulfilling requisite criteria would be considered.

(c) In the revised schemes of NCCP, there is a provision to extend a one time financial assistance of upto Rs. 3.00 crore to the existing RCCs for upgrading their infrastructure based on an action plan to be submitted by them.

(d) and (e) Applications for recognition of RCCs have been received from the State Government of J&K, Goa, UP, Jharkhand and Meghalaya. The recognition is subject to technical evaluation.

(f) This information is not Centrally available.